

SENATE BILL 3047  
By Jackson

AN ACT to amend Tennessee Code Annotated, Section 68-1-121, relative to waiver of foreign country residence requirement with respect to medical graduates.

BE IT ENACTED BY THE GENERAL ASSEMBLY OF THE STATE OF TENNESSEE:

SECTION 1. Tennessee Code Annotated 68-1-121, is amended by deleting the Section in its entirety and substituting the following:

Section 68-1-121. (a) The commissioner of health is empowered to promulgate public necessity rules and regulations pursuant to a waiver of the foreign residence requirement with respect to an alien who agrees to practice medicine in a federally-designated underserved area of the state of Tennessee in accordance with the requirements of the Immigration and Nationality Technical Corrections Act of 1994 (Pub. L. 103-416) as amended. Primary care physicians and physician specialists shall be eligible for the waiver. The primary care physicians shall have completed a residency in family practice, general pediatrics, obstetrics, or general internal medicine. Physician specialists shall have a subspecialty in a medical specialty.

(b) Primary care physicians, including primary care physicians who have subspecialty training, shall be placed in health care practice sites which are located in counties containing federally designated Health Professional Shortage Areas (HPSAs) and/or Medically Underserved Areas (MUAs), either of which must also be located within the top thirty (30) State designated Health Resource Shortage Areas (HRSAs) for TennCare, Primary Care, Obstetrics or Pediatrics. Each primary care physician shall agree to practice either primary care or a combination of primary care and subspecialty care for a minimum of forty (40) hours per week for a minimum of three (3) years. No more than thirty percent (30%) of the slots permitted by federal law shall be allocated

to physician specialists between October 1 and June 30 of each federal fiscal year. To be considered, physician specialists shall be affiliated with a hospital that meets one (1) of the following criteria: within the twenty (20) non-psychiatric hospitals with the highest percentage of total adjusted patient days for TennCare patients, a Rural Referral Center hospital, a Sole Community hospital, a Medicare Dependent hospital, a Critical Access hospital, or a rural hospital meeting the guidelines for placement of a primary care physician. Physician specialists shall agree to practice their speciality with the affiliated hospital for a minimum of forty (40) hours per week and for a minimum of three (3) years.

(c) Additionally, no more than twenty-five percent (25%) of the specialty physicians granted slots between October 1 and June 30 of each year may serve in urban HPSAs. A hospital that has received a physician specialist slot between October 1 and March 31, may only have its application for a second specialist physician accepted if additional slots permitted by federal law are available and the thirty percent (30%) of specialty slots have not been committed by April 1. If the full complement of slots permitted by federal law has not been committed by June 30, the percentage limitations on the number of slots allocated to specialty physicians and on the placement of specialty physicians, set forth above, shall no longer be applicable. However, only applications from qualifying affiliated hospitals shall continue to be considered. After June 30 of each year, applications with primary care physicians affiliating with hospitals that meet the criteria for physician specialist may be considered.

SECTION 2. This act shall take effect upon becoming a law, the public welfare requiring

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